UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA

APPLICATION FOR REFUND (USDC-CAND PAY.GOV)

PAY.GOV TRANSACTION DETAILS

*IMPORTANT: In the fields in this section, enter the information for the **incorrect** transaction (the one for which you are requesting a refund), not the **correct** transaction that appears on the docket. This information can be found in the Pay.gov Screen Receipt or the Payment Confirmation e-mail.*

Your Name:	**Your Phone Number:**
Your Email Address:	**Full Case Number (if applicable):**
Pay.gov Tracking ID Number:	**Fee Type:** ☐ **Attorney Admission** ☐ **Civil Case Filing** ☐ **FTR Audio Recording** ☐ **Notice of Appeal** ☐ **Pro Hac Vice** ☐ **Writ of Habeas Corpus**
Agency Tracking ID Number: 0971-	
Transaction Date:	
Transaction Time:	
Transaction Amount (Amount to be refunded):	
Reason for Refund Request:	

Efile this form using OTHER FILINGS → OTHER DOCUMENTS → APPLICATION FOR REFUND. *View detailed instructions at: cand.uscourts.gov/ecf/payments. For assistance, contact the ECF Help Desk at 1-866-638-7829 or ecfhelpdesk@cand.uscourts.gov Monday -Friday 9:00 a.m.-4:00 p.m.*

FOR U.S. DISTRICT COURT USE ONLY	
Refund Request: ☐ Approved ☐ Denied ☐ Denied - Resubmit Amended Application (see Reason for Denial)	
Approval/Denial Date:	Request Approved/Denied By:
Pay.gov Refund Tracking ID Refunded:	
Agency Refund Tracking ID Number:	
Date Refund Processed:	Refund Processed By:
Reason for Denial (if applicable):	
Referred for OSC Date (if applicable):	